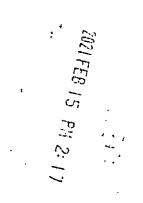
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(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
(0.13.0.2.151.110.10.17)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Г <u>.</u>								
Special Instructions to Filing Officer:								
Office Use Only								



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02/15/21--01025--011 **25.00



O SIMMONS APR 05 2021



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel Pietropolo rachael.pietropolo@cscglobal.com

Date: February 8, 2021

Order#: 627113-023

Re: MAVIS SOUTHEAST LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \underline{XX} Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Rachel Pietropolo c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: MAVIS SOUTHE	AST LI	LC				
2. (a)	358 SAW MILL RIVER ROAD	(b)	358 SAW	MILL RIVER ROAD		
(<u>u</u>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	υ,		failing address of limited liability cot (Note: MAY BE POST OFFICE B		
		MILLWOOD, NY 10546	_		MILLWOO	D, NY 10546		
		12/04/2017	_		M17000010	0187		
3.		Date of filing/registration in Florida	4.		I	Document number		
5.	(a)	C T CORPORATION SYSTEM						
(4	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State				: 2021 FE		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1200 SOUTH PINE ISLAND ROAD				G	I	
		PLANTATION ,FL	33324					1
(b	hì	Corporation Service Company				=	- L	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Of</u>			ress:			
		NEW Registered Office Address:						
		1201 Hays Street			<u> </u>			
		Tallahassee, FL	32301					
chai agei was	ige it w /we	mited liability company is not organized under the laws or changes are made, the Florida street address of the result be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of ganization or the operating agreement of the li	egister sility co the lin	ed on nit	office and pany, it is ed liability	the business office of the regis hereby confirmed that the char company or as otherwise prov	stered ige(s)))
		Xie & Comi	Jill	Ci		ized Person		
Si	gnat	ure of a member or authorized representative of a member				Printed or typed name of signee		
prov the (to m	visio Obli Te rc	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete po- igations of my position as registered agent as provided j by reflect a change in the registered office address, I he I is writing of this change.	to act erform for in (reby c	t in an Ch on	n this capac ace of my di apter 605, firm that th	city. I further agree to comply uties, and I am familiar with a F.S. Or, if this document is be the limited liability company ha	with according fi s been	the cept iled n
Sign	<u>ب</u> Latur	c of Registered Agent						